| PATENT APPLICATION | ON FEE DETER | | ON RECO | RD 7 | pplication | ar D | OSSO | nber | 09/8489 |
|---|--|----------------------------------|------------------|------------|---|-----------------------------|--------------------|------------------------|---------|
| CLAIMS A | S FILED - PAR (Column 1) | | mn 2) | SMALL E | ИППҮ | | OTHER | THAN | |
| TOTAL CLAIMS | 30 | | | PATE | FEE | 1 | RATE | FEE | |
| FOR | NUMBER FILED | KUME | ER EXTRA | BASIC FEE | 355.00 | OR | BASIC FEE | 710.00 | |
| TOTAL CHARGEABLE CLAIMS | 30 minus 20 | . 10 | , 7 | X3 9= | 1 | OR | X\$18= | | |
| NDEPENDENT CLAIMS | 4 minus 3 = | | | X40= | 90 | | X80= | | |
| MULTIPLE DEPENDENT CLAIM P | RESENT | | | | 40 | OR | | | |
| If the difference in column 1 is | loss than zem. en | or TV in c | لبختت | ÷135= | | OR | +270= | | |
| | | | ARBITUT & | TOTAL | 485 | OR | TOTAL | | |
| 12/20/01/ CLAIMS AS A | MENDED - PART II(Column 2)(Column 3) | | | SMALL | SMALL ENTITY | | | THAN | |
| CLAIMS REMADENG AFTER AMENDMENT Total Independent | HU NI PRE | WEST MBER. VIOUSLY DFOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | ·· | RATE | ADDI- TIONAL FEE | |
| Total · 30 | Minus - | 30 | -6 | XX 9= | | OR | X\$18= | 1 | |
| Independent • U | Minus | Ч VT CI AIM | | X40=- | | OR | X80= | | |
| | | | | +135= | • } | OR | +270= | | • |
| • | ٠: : : : : : : : : : : : : : : : : : : | • | ••• | ADDIT, FEE | 45 | OR": | TOTAL DOIT, FEE | | |
| 8-19-05 (Cotumn 1) | (Col | | (Column 3) | | | • | | | |
| CLAIMS REMAINING AFTER AMENDMENT Total 34 | PRE | HESY MBER MOUSLY DFOR | PRESEÑT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| Total . • 34 | Minus •• | 30 | - 4 | X\$ 9= | , | OR | XXFE | 200 | _··. |
| mospenoses • L | Minus | 4 | • | X40= | | OR | .X80= | ٠٠٠٠ | |
| FIRST PRESENTATION OF MI | LTIPLE DEPENDE | IT CLAIM | | +135= | | | | | |
| • | | | • | +135= | | OR | +270= YOYAL | | . ed |
| 1-27-06 (Cotumn 1) | ٠ | | /Deb # | ADDIT. FEE | لــنـــــــــــــــــــــــــــــــــــ | OH. | DOTT. FEEL | 200 | |
| CLAIMS | - FLC | HEST | (Column 3) | | ADDI | r | - | ADDI- | |
| AFTER AMENDMENT | PREV | MBER MOUSLY D FOR | PRESENT | RATE | TIONAL FEE | | RATE | TIONAL FEE | |
| Total 33 | | 34 | .0 | X\$ 9= | | OR | X\$18= | " | |
| FIRST PRESENTATION OF ML | Minus | .4 | -4 | X40= | • | OR | X80= | | • |
| I FINOT PRESENTATION OF ML | | II CLAIM | | +135= | | | -270- | | |
| If the may in column 1 is less than th | entry in column 2, we | to "O" in each | mn 3. | 101AL | | OR [| +270= 101AL | | _ |
| " If the Tilghest Number Previously Pa "If the Tilghest Number Previously Pa | e por in this space M Say in this space | ts iess than In less than | 3, enter 30.° | ADDIT, FEE | لننسبي | ORI _A In colu | DOIT. FEEL | | • |

FORM PTO-675

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